

EVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing- 2023
Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Jaden Ward

Final Grade: Satisfactory/Unsatisfactory

Semester: Summer Session

Date of Completion:

Faculty: Brian Seitz MSN, RN, Fran Brennan MSN, RN, Chandra Barnes MSN, RN,
 Nick Simonovich MSN, RN, Brittany Lombardi MSN, RN, Kelly Ammanniti MSN, RN
Teaching Assistants: Rachel Haynes BSN, RN

Faculty eSignature:

DIRECTIONS FOR USE:

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S), Needs Improvement (NI), Unsatisfactory (U), and Not Available (NA)**. The faculty member will initial if in agreement with the student's evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written on the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, or U". If the student does not self-rate, then it is an automatic "U". A student who submits the clinical evaluation tool late will be rated as "U" in the appropriate competency(s) for that clinical week. Whenever a student receives a "U" in a competency, the following week it must be addressed with a comment as to why it is no longer a "U". If the student does not state why the "U" is corrected, then it will be another "U" until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. If the final performance code is unsatisfactory in any one of the competencies, a grade of unsatisfactory is given. If a pattern of unsatisfactory performance occurs after performing the competency satisfactorily, this also constitutes a grade of unsatisfactory. An unsatisfactory as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.

METHODS OF EVALUATION:

- Clinical Patient Profile
- Meditech Documentation
- Evaluation of Clinical Performance Tool
- Onsite Clinical Debriefing
- Online Discussion Rubric
- Nursing Process Recording Rubric
- Geriatric Assessment Rubric
- Lasater Clinical Judgment Rubric
- Virtual Simulation scenarios
- Participation in adjunctive therapies (N.A./A.A.; Erie County Detox Unit, Hospice inpatient care)
- EBP Presentations
- Hospice Reflection Journal
- Observation of Clinical Performance
- Clinical Nursing Therapy Group
- Nursing Care Map Rubric

ABSENCE (Refer to Attendance Policy)

| Date | Number of Hours | Comments | Make Up (Date/Time) |
|----------|--------------------------------|--|---------------------|
| 6/23/23 | 2 | Missing vSim posttest for Sharon Cole | 6/26/23 KA |
| 7/8/2023 | 1 | Simulation survey not completed by due date. | 7/10/23 |
| | | | |
| | | | |
| | | | |
| Initials | Faculty Name | | |
| BS | Brian Seitz MSN, RN, CNE | | |
| FB | Frances Brennan, MSN, RN | | |
| KA | Kelly Ammanniti MSN, RN, CHSE | | |
| BL | Brittany Lombardi MSN, RN, CNE | | |
| NS | Nick Simonovich MSN, RN | | |
| CB | Chandra Barnes MSN, RN | | |
| RH | Rachel Haynes BSN, RN | | |

* End-of-Program Student Learning Outcomes

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

Satisfactory (S): Safe, accurate each time, efficient, coordinated, confident, focuses on the patient, some expenditure of excess energy, within a reasonable time period, appropriate affective behavior, occasional supporting cues, minimal faculty feedback needed related to written clinical work.

UNSATISFACTORY CLINICAL PERFORMANCE

Needs Improvement (NI): Safe, accurate each time, skillful in parts of behavior, focuses more on the skill and self rather than the patient, inefficient, uncoordinated, anxious, worried, and flustered at times, expends excess energy within a delayed time period, frequent verbal and occasional physical directive cues in addition to supportive cues, faculty feedback required in several areas of clinical written work.

Unsatisfactory (U): Failure to achieve the course competency, safe but needs faculty reminders constantly, not always accurate, unskilled, inefficient, considerable expenditure of excess energy, anxious, disruptive or omitting behaviors, focus on skills and/or self, continuous verbal and frequent physical cues, unsafe, performs at risk to patient/clients/others, unable to function, incomplete, erroneous, faulty, illegible clinical written work, no feedback sought from faculty or response to feedback not evident in submitted written work. If the student does not self-rate a competency the competency is graded "U." A "U" in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the "U," the faculty member (s) will continue to rate the competency unsatisfactory.

OTHER

Not Available (NA): The clinical experience which would meet the competency was not available.

| Objective | | | | | | | | | | |
|--|---|-----|---------|-------------------|----|-----|----|-----|---------|-------|
| 1. Apply the principles of psychiatric theory in the care of adolescent to geriatric patients with a mental illness diagnosis. (1, 2, 3, 5, 6, 7, 8)* | | | | | | | | | | |
| Weeks of Course: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Make Up | Final |
| Competencies: | | N/A | N/A | S | S | N/A | S | N/A | N/A | |
| a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder. (noticing) | | N/A | N/A | S | S | N/A | S | N/A | N/A | |
| b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. (interpreting) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| c. Provide culturally and spiritually competent care within the scope of nursing that meets the needs of assigned patients from diverse cultural, racial and ethnic backgrounds. (responding) | | N/A | N/A | N/A S | S | N/A | S | N/A | N/A | |
| d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care (noticing) | | N/A | N/A | N/A S | S | N/A | S | N/A | N/A | |
| e. Recognize social determinants of health and the relationship to mental health. (reflecting) | | N/A | N/A | S | S | N/A | S | N/A | N/A | |
| f. Develop and implement an appropriate nursing therapy group activity. (responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| g. Develop a geriatric physical/mental health assessment and education plan. (Geriatric Assessment) (responding) | | | | | S | | | N/A | N/A | |
| Faculty Initials | | RH | KA | KA | RH | BS | RH | | | |
| Clinical Location | | N/A | Hospice | AA meeting, Detox | 1S | N/A | 1S | N/A | N/A | |

* End-of-Program Student Learning Outcomes

Comments:

Week 4 – 1a & 1d – Jade, you did a great job discussing substance use disorder and how it relates to mental health and other physical and environmental aspects regarding the patient's health. KA

Week 4 – 1c – Jade, you did a nice job discussing spiritual and cultural care related to the detox center and how they have bibles and pastoral aid available upon request. KA

Week 5: 1(a)- Great job connecting the pathophysiology of your patient's diagnosis this week. RH

Week 7: 1(e)- You did a great job discussing social determinates of health related to your patient's mental health diagnosis on your care map this week. RH

| Objective | | | | | | | | | | |
|---|---|-----|-----|------------------|---------|-----|----|-----|---------|-------|
| 2. Synthesize concepts related to psychopathology, health assessment data, evidenced based practice and the nursing process using clinical judgment skills to plan and care for patients with mental illness. (1, 2, 3, 4, 5, 6, 7, 8)* | | | | | | | | | | |
| Weeks of Course: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Make Up | Final |
| Competencies: | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| a. Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. (noticing) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| b. Identify patient's subjective and objective findings including labs, diagnostic tests, and risk factors. (noticing, recognizing) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. (noticing, interpreting) | | N/A | N/A | N/A S | S | N/A | S | N/A | N/A | |
| d. Formulate a prioritized nursing care map utilizing clinical judgment skills. (noticing, interpreting, responding, reflecting) | | N/A | N/A | N/A | S NA | N/A | S | N/A | N/A | |
| e. Apply the principles of asepsis and standard precautions. (responding) | | N/A | S | S | S | N/A | S | N/A | N/A | |
| f. Practice use of standardized EBP tools that support safety and quality. (noticing, responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| Faculty Initials | | RH | KA | KA | RH | BS | RH | | | |

Comments:

Week 4 – 2c – Jade, you were able to discuss and identify ways individuals that utilize the detox center can help achieve self-care related to their addiction. KA
 Week 5: 2(a, b)- Good job gathering a detailed health history on your patient this week as well as identifying labs and diagnostic tests they had done prior to or during their admission to 1 South. RH
 Week 5: 2(d): I changed this to NA due to the fact you did not complete a care map this week. RH
 Week 7: 2(a-d) Jade, your care map this week was very well done. You were able to assess your patient to gather assessment findings, gather lab values, and identify risk factors. You then developed some nursing diagnoses and what to look for in relation to the highest priority problem. Great job! RH

* End-of-Program Student Learning Outcomes

| Objective | | | | | | | | | | |
|---|---|-----|-----|-----|-----|-----|----|-----|---------|-------|
| 3. Refine basic verbal and nonverbal therapeutic communication skills when interacting with patients, families, and members of the health care team. (1, 2, 3, 5, 7, 8)* | | | | | | | | | | |
| Weeks of Course: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Make Up | Final |
| a. Illustrate professionally appropriate and therapeutic communication skills in interactions with patients, and families. (responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| b. Demonstrate professional and appropriate communication with the treatment team by using the SBAR format for handoff communication during transition of care. (responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| c. Identify barriers to effective communication. (noticing, interpreting) | | N/A | S | N/A | S | N/A | S | N/A | N/A | |
| d. Construct effective therapeutic responses. (responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| e. Construct a satisfactory patient-nurse therapeutic communication. (Nursing Process Study) (responding, reflecting) | | | | | N/A | | | S | N/A | |
| f. Posts respectfully and appropriately in clinical discussion groups. (responding, reflecting) | | N/A | S | S | S | N/A | S | N/A | N/A | |
| g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. (responding) | | N/A | S | S | S | N/A | S | N/A | N/A | |
| h. Teach patient/family based on readiness to learn and patient needs. (responding, reflecting) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| Faculty Initials | | RH | KA | KA | RH | BS | RH | | | |

Comments:

Week 4 – 3f – Jade, you responded to all CDG questions related to the detox center and Sandusky Artisans center with thoughtful and thorough responses. You supported your information with a references and in-text citations. Remember when in-text citing a direct quotation to include a page number or a paragraph number if there are no page numbers in the in-text citation. Keep up the great work! KA

Week 5: 3(f)- You provided a very detailed CDG this week and answered all prompts thoroughly. Great job! RH

* End-of-Program Student Learning Outcomes

Week 7: 3(a, c, d, f) Jade, you did great communicating with your patient as well as other patients on the unit this week. You also did a good job with your discussion post this week. RH

| Objective | | | | | | | | | | |
|---|---|-----|-----|-----|----|-----|----|-----|---------|-------|
| 4. Demonstrate knowledge of frequently prescribed medications utilized in treating mental illness. (1, 4, 5, 6, 7)* | | | | | | | | | | |
| Weeks of Course: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Make Up | Final |
| a. Discuss the safe administration of medication while observing the six rights of medication administration. (responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| b. Demonstrate ability to discuss the uses and implication of psychotropic medications. (responding, reflecting) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| c. Identify the major classification of psychotropic medications. (interpreting) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| d. Identify common barriers to maintaining medication compliance. (reflecting) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications. (responding, reflecting) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| Faculty Initials | | RH | KA | KA | RH | BS | RH | | | |

Comments:

Week 5: 4(a, b, c, e)-Jade, you did great with looking up and administering medications this week. You had quite the list on the first day and you did an awesome job describing each one, not only to me but your patient as well. RH

Week 7: 4(a-e)- Jade, you looked up all medications and we discussed what they were for as well as the side effects to monitor for. You educated your patient on the medications and you identified all rights and performed all checks. RH

* End-of-Program Student Learning Outcomes

Objective

5. Develop an awareness of community Mental Health resources and services. (5, 6, 7, 8)*

| Weeks of Course: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Make Up | Final |
|--|---|-----|-----|-------|-----|-----|----------|-----|---------|-------|
| a. Identify the need for the community resources-detox unit available to patients with a mental illness. (noticing, interpreting) | | N/A | N/A | N/A S | S | N/A | N/A | N/A | N/A | |
| b. Discuss recommendations for referrals to appropriate community resources and agencies. (reflecting) | | N/A | N/A | N/A S | S | N/A | N/A S | N/A | N/A | |
| c. Attend Erie County Health Department Detox Unit observing the care of a patient with mental illness-substance abuse. (Community Agency Observation-Detox Unit) | | N/A | N/A | S | N/A | N/A | N/A | N/A | N/A | |
| d. Attend Narcotics/Alcoholics Anonymous meeting. (Alcoholics/Narcotics Anonymous at the Sandusky Artisans Recovery Center Observation) | | N/A | N/A | S | N/A | N/A | N/A | N/A | N/A | |
| Faculty Initials | | RH | KA | KA | RH | BS | RH | | | |

Comments:

Week 4 – 5a & 5c – Jade, you discussed many aspects about the detox center including the admission process and the different roles of healthcare personnel at the facility. You were insightful when discussing the benefits of this resource to our community. KA

Week 4 – 5b, & 5d – Jade, you did a great job discussing the importance of community resources like the Sandusky Artisans and how they help individuals with addiction find support through recovery. KA

Week 7: 5(b)- I changed this to “S” because for your CDG this week you needed to identify an online resource that could be used as a referral if needed for your patient. RH

* End-of-Program Student Learning Outcomes

Objective

6. Demonstrate satisfactory proficiency when using informatics and techniques in the assessment of patients with a mental illness diagnosis. (1, 2, 3, 4, 6, 8)*

| Weeks of Course: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Make Up | Final |
|---|---|-----|-----|-----|----|-----|----|-----|---------|-------|
| Competencies: | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| a. Demonstrate competence in navigating the electronic health record. (responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record. (responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| c. Demonstrate the use of technology to identify mental health resources. (responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| Faculty Initials | | RH | KA | KA | RH | BS | RH | | | |

Comments:

week 5: 6(a-c)- You did well with navigating the EHR and used the EMAR to pass medications with minimal to no assistance. RH

* End-of-Program Student Learning Outcomes

Objective

7. Evaluate self-participation in patient care experiences with the focus on safety, ethical, legal, and professional responsibilities. (7)*

| Weeks of Course: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Make Up | Final |
|--|---|-----|------------------|------------------|----|-----|----|-----|---------|-------|
| a. Identify your strengths for care delivery of the patient with mental illness. (reflecting) | | N/A | N/A S | N/A S | S | N/A | S | N/A | N/A | |
| b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care. (responding) | | N/A | N/A | N/A | S | N/A | S | N/A | N/A | |
| c. Illustrate active engagement in self-reflection and debriefing. (reflecting) | | N/A | S | S | S | N/A | S | N/A | N/A | |
| d. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE” – attitude, commitment, and enthusiasm during all clinical interactions. (responding) | | N/A | S | S | S | N/A | S | N/A | N/A | |
| e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (responding) | | N/A | S | S | S | N/A | S | N/A | N/A | |
| f. Comply with the standards outlined in the FRMCSN policy, “Student Conduct While Providing Nursing Care.” (responding) | | N/A | S | S | S | N/A | S | N/A | N/A | |
| Faculty Initials | | RH | KA | KA | RH | BS | RH | | | |

Comments:

Week 3 – 7a – The nurse on hospice commented, “Jaden assisted with hands on personal care and administering medications. Observed doctors’ rounds. Observed an admission on unit. The nurse rated you as satisfactory in all areas. KA

Week 3 – 7c – Jade, you did a nice job reflecting on your hospice experience and all the different experiences you were able to see while on the unit. I am happy you were able to see different aspects of the inpatient unit including respite care. KA

Week 4 – 7a & 7c – Jade, you did a nice job reflecting on your experience at the detox center and were able to openly discuss your feelings about mental health and the benefits of community resources for individuals with substance use disorder and other mental health conditions. Great job! KA

Week 5: 7(c)- Jade, you were an active participant in debriefing and discussed your experience with your peers. You provided reflection on the two days and were able to discuss some improvements you plan to make for your next clinical. RH

Firelands Regional Medical Center School of Nursing
Nursing Care Map Rubric

| Student Name: Jade W. | | Course Objective: | | | | | |
|--|--|---|-----------------|---|-------------------------------------|---------------|---|
| Date or Clinical Week: 1 South; Day 3 | | | | | | | |
| Criteria | | 3 | 2 | 1 | 0 | Points Earned | Comments |
| Noticing | 1. Identify all abnormal assessment findings (subjective and objective); include specific patient data. | (lists at least 7*) *provides explanation if < 7 | (lists 5-6) | (lists 5-7 but no specific patient data included) | (lists < 5 or gives no explanation) | 3 | 2. Blood glucose is not really related to ineffective coping unless the patient has an eating disorder or is stress eating. |
| | 2. Identify all abnormal lab findings/diagnostic tests; include specific patient data. | (lists at least 3*) *provides explanation if < 3 | | (lists 3 but no specific patient data included) | (lists < 3 or gives no explanation) | 3 | |
| | 3. Identify all risk factors relevant to the patient. | (lists at least 5*) *provides explanation if < 5 | (lists 4) | (lists 3) | (lists < 3 or gives no explanation) | 3 | |
| Interpreting | 4. List all nursing priorities and highlight the top priority problem. | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | 5. Deflecting with jokes is a great observation! 7. Very detailed signs and symptoms, good job |
| | 5. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem. | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | |
| | 6. Identify all potential complications for the top nursing priority problem. | (lists at least 3) | (lists 2) | | (lists < 2) | 3 | |
| | 7. Identify signs and symptoms to monitor for each complication. | (lists at least 3) | (lists 2) | | (lists < 2) | 3 | |
| Res | 8. List all nursing interventions relevant to the top nursing priority. | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | 10. educate on follow up appointments more than once if the patient does not understand the need for the follow up. |

| | | | | | | | |
|---|---|----------------|-----------------|----------------|--------------|--|--|
| pondering | 9. Interventions are prioritized | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | |
| | 10. All interventions include a frequency | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | |
| | 11. All interventions are individualized and realistic | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | |
| | 12. An appropriate rationale is included for each intervention | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | |
| Reflecting | 13. List all of the highlighted reassessment findings for the top nursing priority. | >75% complete | 50-75% complete | <50% complete | 0% complete | 3 | |
| | 14. Evaluation includes one of the following statements: <ul style="list-style-type: none"> • Continue plan of care • Modify plan of care • Terminate plan of care | Complete | | | Not complete | 3 | |
| <p>Total Possible Points= 42 points 42-33 points = Satisfactory 32-21 points = Needs Improvement* < 21 points = Unsatisfactory*</p> <p>*Total points adding up to less than or equal to 32 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.</p> <p>Faculty/Teaching Assistant Comments:</p> | | | | | | <p>Total Points: 42/42 Satisfactory</p> | |
| | | | | | | <p>Faculty/Teaching Assistant Initials: RH</p> | |

Geriatric Assessment Rubric
2023

Student Name: _Jaden Ward_

Date: __6/26/2023__

Clinical Assessment Rubric

Mental/Physical Health Status Assessment

| | Points Possible | Points Received |
|---|-----------------|-----------------|
| Physical Assessment | 4 | 4 |
| Geriatric Depression Scale (short form) Assessment | 4 | 4 |
| Short Portable mental status questionnaire | 4 | 4 |
| Geriatric Health Questionnaire | 2 | 2 |
| Time and change test | 4 | 4 |
| Cognitive Assessment (Clock Drawing) | 4 | 4 |
| Falls Risk Assessment (Get Up and Go) | 4 | 4 |
| Brief Pain inventory (Short form) | 2 | 2 |
| Nutrition Assessment (Determine Your Nutritional Health) | 4 | 4 |
| Instrumental ADL/ Index of Independence in ADL | 4 | 4 |
| Medication Assessment – If medications are on the BEERS List not identified on medication list. | 4 | 3 |
| | | |
| Points | 40 | 39 |

Education Assessment

| | Points Possible | Points Received |
|---|-----------------|-----------------|
| Learning Needs Identified and Prioritized (3) – Not written in diagnosis format like example with related to section. | 10 | 8 |
| Priorities pertinent to learning needs (3) | 5 | 5 |
| Nursing interventions related to learning needs (5) | 10 | 10 |
| | | |
| Points | 25 | 23 |

Education Plan

| | Points Possible | Points Received |
|---|-----------------|-----------------|
| Education Prioritization and Barriers to Education | 5 | 5 |
| Teaching Content and Methods used for Education – Minimal detail provided on this section. You should list a few topics covered under each education priority. | 10 | 2 |
| Evaluation of Education Plan | 10 | 10 |
| Education Resources attached | 10 | 10 |
| | | |
| Points | 35 | 27 |

Total Points 89/100

Jade, you satisfactorily completed your Geriatric Assessment. Overall you did a nice job completing the assessment on your patient. You could have spelled out your education a little more to make it easier to see what you taught. See comments above on areas for improvement. KA

You must receive a total of 77 out of 100 points to receive a “S” grade on the Evaluation of Clinical Performance tool. Due date can be located on the clinical schedule.

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: A=Assessment Nurse; M=Medication Nurse

STUDENT NAME(S): Ashley Huntly (A), Jade Ward (M)

GROUP #: 1

SCENARIO: 2

OBSERVATION DATE/TIME(S): 7/5/2023 0800-0915

| CLINICAL JUDGMENT | OBSERVATION NOTES |
|--|---|
| <p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B | <p>Introduced self and role when entering the room. Focused observation on patient's mental status and orientation. Focused observation on vital signs.</p> <p>Noticed bruises and abrasions.</p> <p>Noticed tremors. Noticed increased anxiety. Noticed BP 154/78. Noticed diaphoresis. Noticed nervousness. Noticed itching. Noticed visual hallucinations. Noticed agitation.</p> <p>Explored further information related to refusal of available resources.</p> |

| | |
|---|--|
| | <p>Did not seek further information related to history of substance misuse.</p> |
| <p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B | <p>Prioritized vital sign assessment. Made sense of elevated BP due to anxiety and potential withdrawal symptoms.</p> <p>Prioritized CIWA assessment.</p> <p>Made sense of CIWA assessment interpreting score of 22.</p> <p>Prioritized focused physical respiratory assessment prior to administering a CNS depressant medication.</p> <p>Interpreted rationale for Ativan administration. Appropriate dosage administered calculated based on protocol (4mg).</p> |
| <p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B | <p>CIWA assessment performed in full</p> <p>Neuro assessment performed to determine orientation.</p> <p>Focused assessments performed prior to medication administration.</p> <p>Discussed participation in group therapy activities.</p> <p>Teamwork and collaboration to determine appropriate CIWA score and Ativan dose per protocol (4mg).</p> <p>Educated on Ativan administration for anxiety.</p> <p>Provided education on support groups and encouraged patient to participate.</p> <p>Did not perform Brief mental health evaluation.</p> |
| <p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B | <p>Each member of the group actively participated during debriefing. Appropriate questions were asked. Identified rationale behind decision making. Identified use of clinical judgment during the scenario. Each group member discussed strengths and weaknesses in their performance. Alternate choices were discussed for improvement in the future.</p> |
| <p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “Developing” or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Objectives:</p> | <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient’s situation from the patient and family to support planning interventions; occasionally does not pursue important leads.</p> <p>Interpreting: Focuses on the most relevant and important data useful for explaining the patient’s condition. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient’s data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.</p> |

| | |
|--|---|
| <ol style="list-style-type: none"> 1. Demonstrate effective therapeutic communication while interacting with patient admitted for an acute mental health crisis. (1, 2, 3)* 2. Utilize the CIWA scale to assess a patient with a history of substance abuse. (1, 2)* 3. Determine appropriate medication administration steps utilizing the CIWA scale. (4)* 4. Provide patient with appropriate education on community support and resources. (5)* <p>* Course Objectives</p> <p>You are satisfactory for this scenario. NS</p> | <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered. Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses.</p> |
|--|---|

/e360/apps/v9/releases/1685066305/public/upload/firelands/media/dropbox/118889-week8redoandfinal-jaden.docx

Firelands Regional Medical Center School of Nursing
 Psychiatric Nursing 2023
 Simulation Evaluations

| | |
|--|--|
| | |
|--|--|

| vSim Evaluation | Linda Waterfall (Anxiety/Cultural Scenario) (*1,2,3,4,5) | Sharon Cole (Bipolar Scenario) (*1,2,3,4,5) | Sandra Littlefield (Borderline Personality Disorder Scenario) (*1,2,3,4,5) | Live Adult Mental Health Simulation (Alcohol Withdrawal) (*1,2,3,4,5) | George Palo (Alzheimer's Disorder) (*1,2,3,4,5) | Randy Adams (PTSD Scenario) (*1,2,3,4,5) |
|--|--|---|---|--|---|--|
| Performance Codes: S: Satisfactory U: Unsatisfactory | Date: 6/9/2023 | Date: 6/23/2023 | Date: 6/30/2023 | Date: 7/5-6/2023 | Date: 7/7/2023 | Date: 7/21/2023 |
| Evaluation | S | U | S | U | S | |
| Faculty Initials | RH | KA | RH | BS | BS | |
| Remediation: Date/Evaluation/Initials | N/A | S | N/A | S | NA | |

* Course Objectives

Week 4 – vSim Sharon Cole – Post Test not completed by the due date and time. Once this was brought to the student's attention the post test was completed promptly satisfactorily completing the vSim experience. KA

Week 6- Simulation survey not complete by the due date and time. The survey is now completed. BS

EVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

I was given the opportunity to review my final clinical ratings in each course competency. I was given the opportunity to ask questions about my clinical performance. I have the following comments to make about my clinical performance/final clinical evaluation:

Student eSignature & Date: